

Sustainable Drug Seller Initiatives

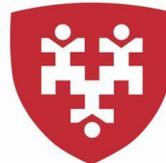
Partners



Department of Population Medicine



Harvard Medical School



Harvard Pilgrim Health Care Institute



Accredited Medicine Store (AMS) Program in Liberia

Arthur Loryoun
SDSI Dissemination Meeting
Arusha
August 5, 2014



Outline



AMS Liberia
implementation progress



Lesson learned and
challenges



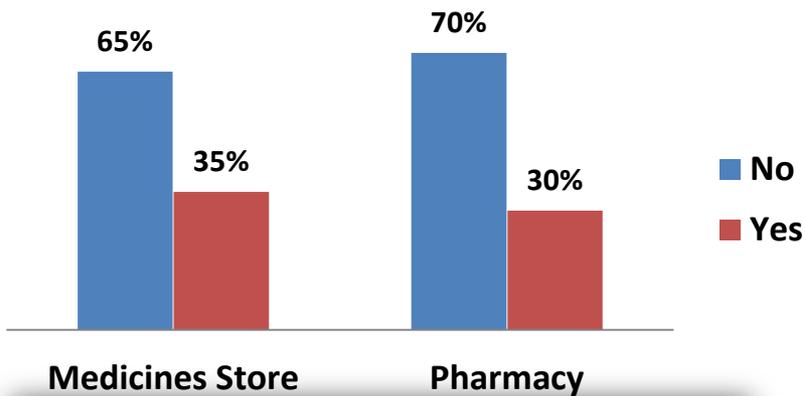
Planning for scale up and
maintenance



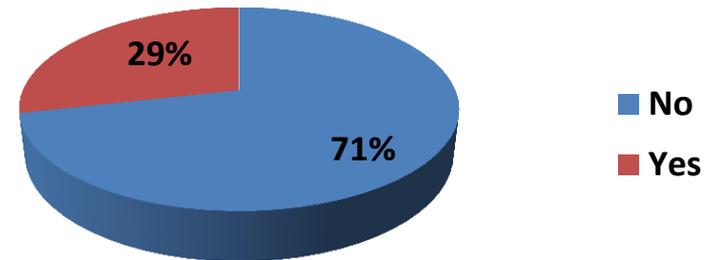
The Problem

Mapping and Preliminary Inspection of Medicine Stores and Pharmacies in Montserrado County, Liberia

Public Sector Medicines in Stock



Medicines Stores with Injectables in Stock



Addressing the drug seller challenges–strategy

- Study tour of key officials to Tanzania to learn of ADDO experiences first hand (**August 2011**)
- Adapt the ADDO standards to Liberia context
- Develop the implementation plan with all stakeholders involvement
 - Mapping and preliminary inspection (**Feb2012**)
 - Training of dispensers and inspectors and owners
 - Institute joint inspection system
 - Launch of AMS program (**Feb2013**)
 - Marketing and public education campaign

**High government
commitment has been
key to smooth
implementation**



Media for public education is a key strategy



Don't Buy Drugs From Street Peddlers

-AMS Warns

By Edwin G. Genoway, Jr

The Accredited Medicine Stores (AMS) program in Liberia has seriously warned the public against buying medicines from street peddlers, who sell drugs in black bags or open buckets around Monrovia.

The AMS said most of the peddlers usually sell expired and substandard drugs that pose danger to human health. It therefore urged Liberians to buy drugs from accredited drug stores under its registry.

The Accredited Medicine Stores program is a process through which operators and proprietors of pharmacies in Liberia are accredited to serve the public. The AMS also trains

environments across the country.

Speaking at a news conference in Monrovia on Tuesday, the Managing Director of Liberia Medicines and Health Products Regulatory Authority (LMHRA), Mr. David Sumo, said it is common here for people to buy medicines in the streets on market tables, in open buckets or from street vendors and unregistered pharmacies.

Mr. Sumo said the AMS has trained over 500 medicines stores owners and dispensers in Montserrado County, empowering them with skills and knowledge in essential medicine procurement, storage, dispensary, business and financial management, among



medicine store owners or dispensers in proper dispensing, business and financial management, customer service as well as upgrading those premises to meet required standards.

The goal of the program is to improve access to quality essential medicines, basic care, referrals and increased pharmaceutical services for much of the population in more populated areas of Liberia.

The program, which is being funded by the Government of Liberia and the Bill and Melinda Gates Foundation, is geared at ensuring that only quality and affordable medicines are sold in standard stores or clean

others.

No one knows precisely how many fraudulent or substandard medicines are sold around the world, but the fragmentary data are alarming.

It is estimated that at least 100,000 people die annually around the world from health problems such as cancer, heart disease, infectious diseases and other ailments as a result of taking in substandard and fake medicines. For example, fake malaria drugs pose a real risk of hampering the international effort to curb the disease. In wealthy nations, substandard or fraudulent drugs have caused thousands of adverse reactions and some deaths.



Public education during road shows



Strengthen regulatory capacity



Study tour of two LMHRA senior pharmacists to Tanzania for a 4 weeks training on TFDA inspection and registration system



Launch of AMS by Minister of Health, 2013



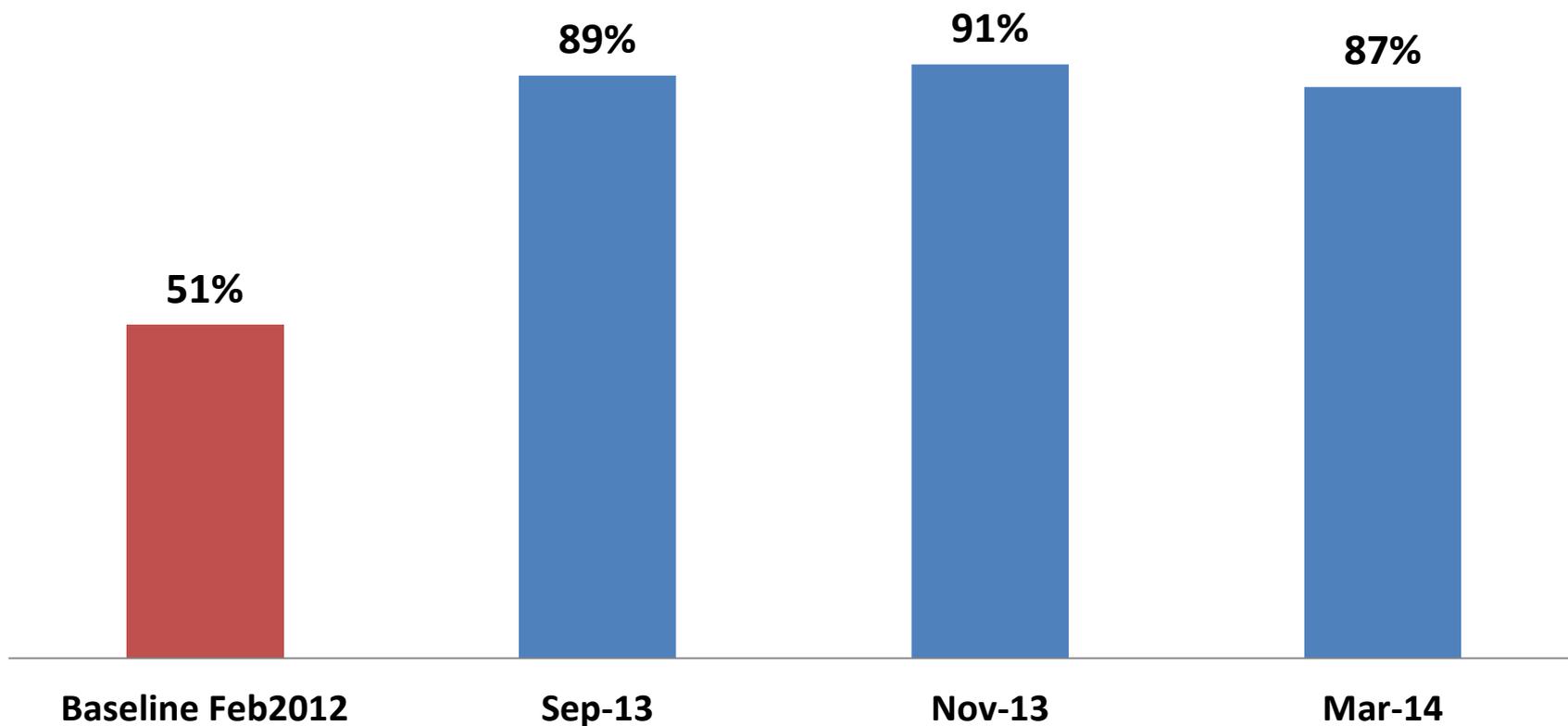
AMS program status



As of June 2014	
Total no. of medicine stores	635
Shops accredited (AMS)	200
Shops in application process	150
Trained dispensers	628
Trained LMHRA/PLB inspectors	17
Trained AMS proprietors	160

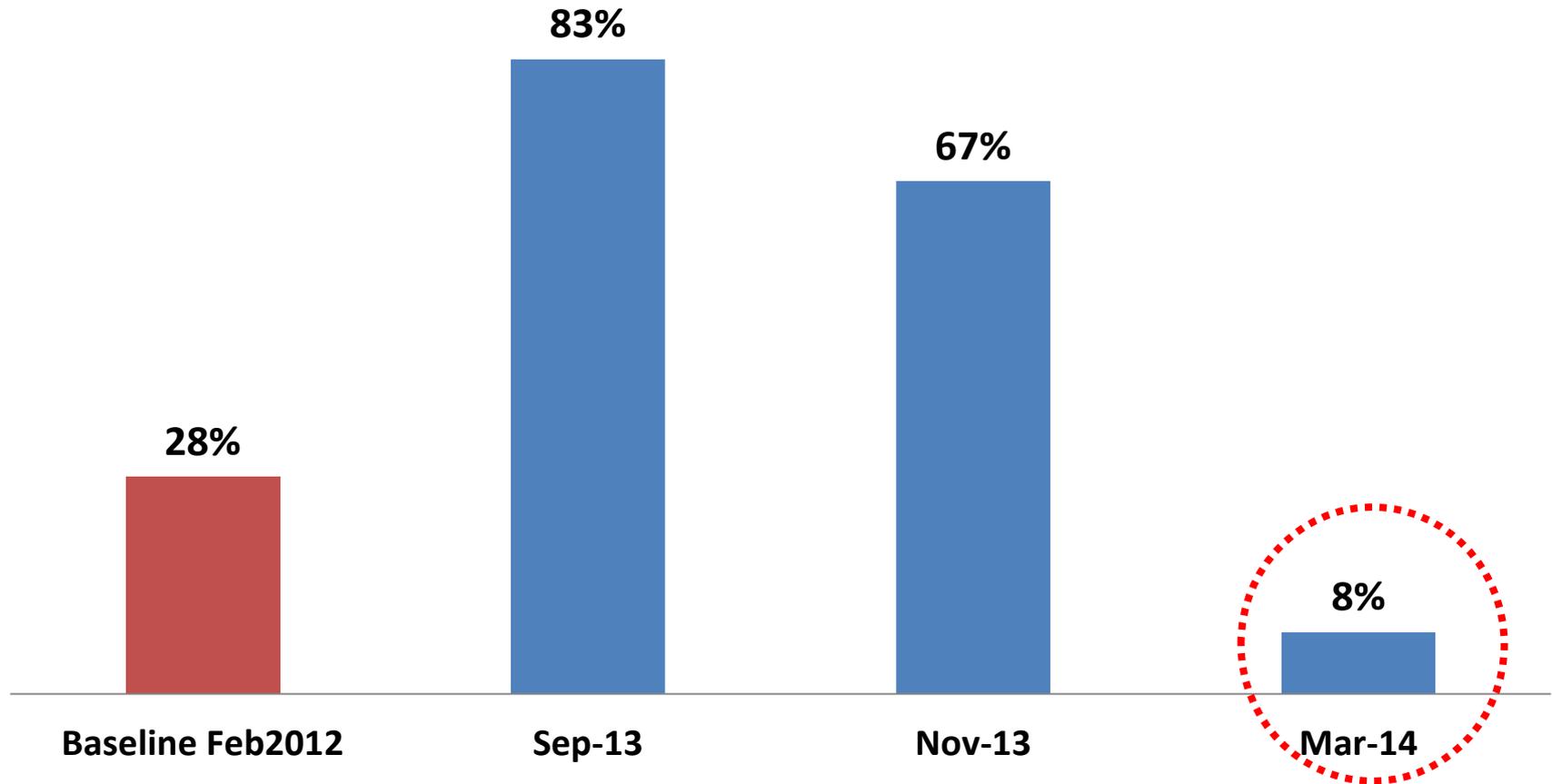
Results-Registration Status

Medicine Stores Currently Registered with PBL in Montserrado



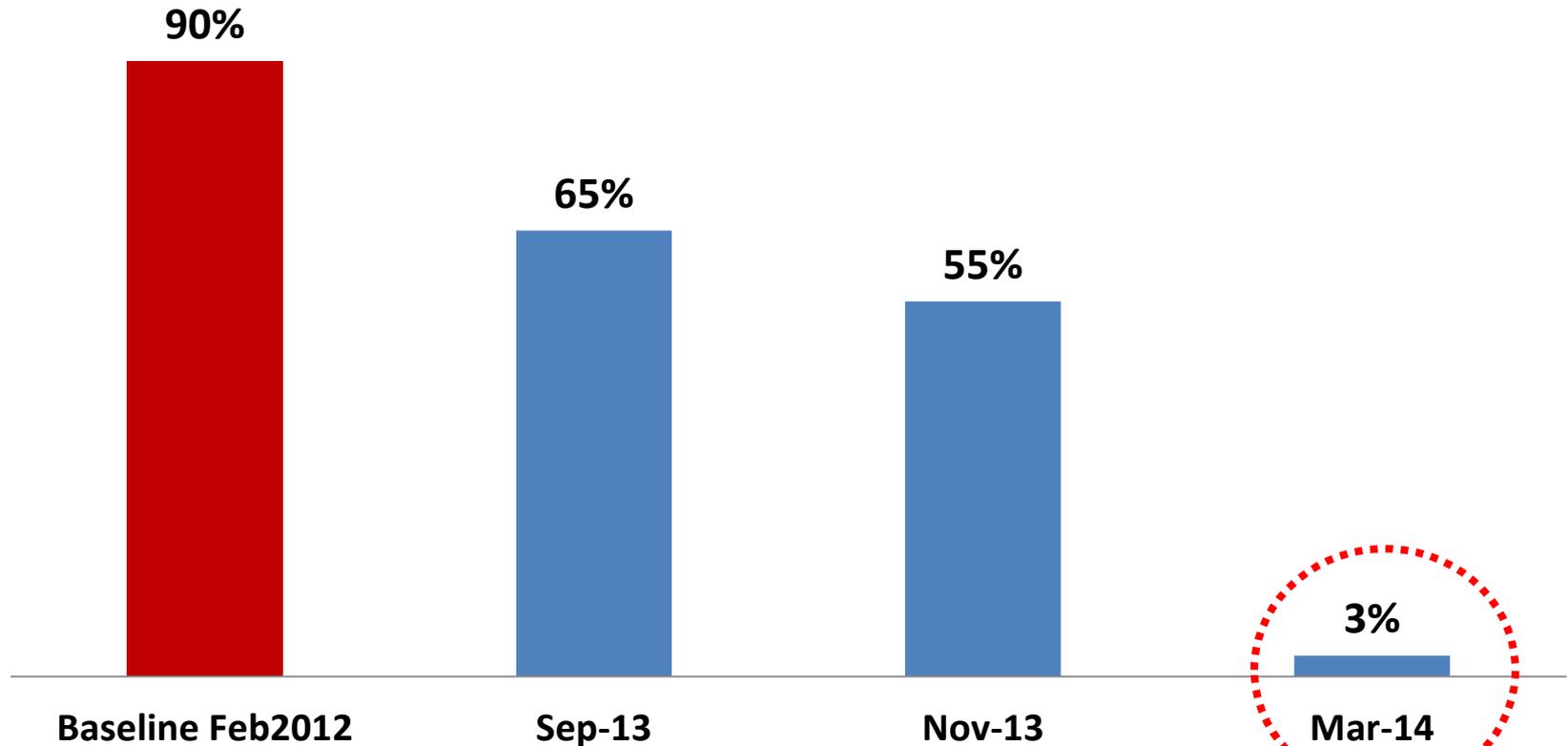
Results-Product Quality (1)

Expired, damaged, counterfeit products found on the shelves



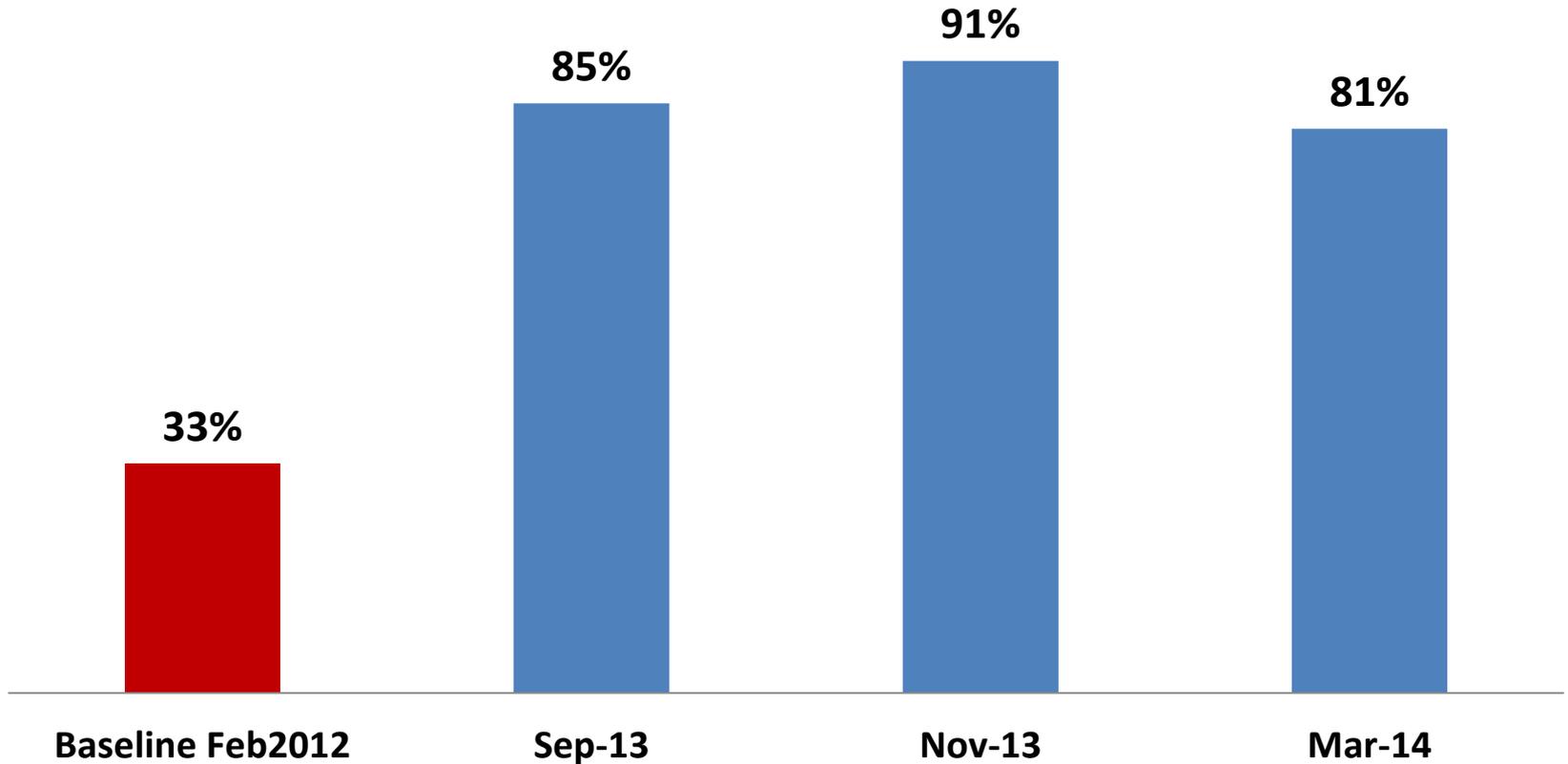
Results-Product Quality (2)

Medicines not on the AMS extended list in stock



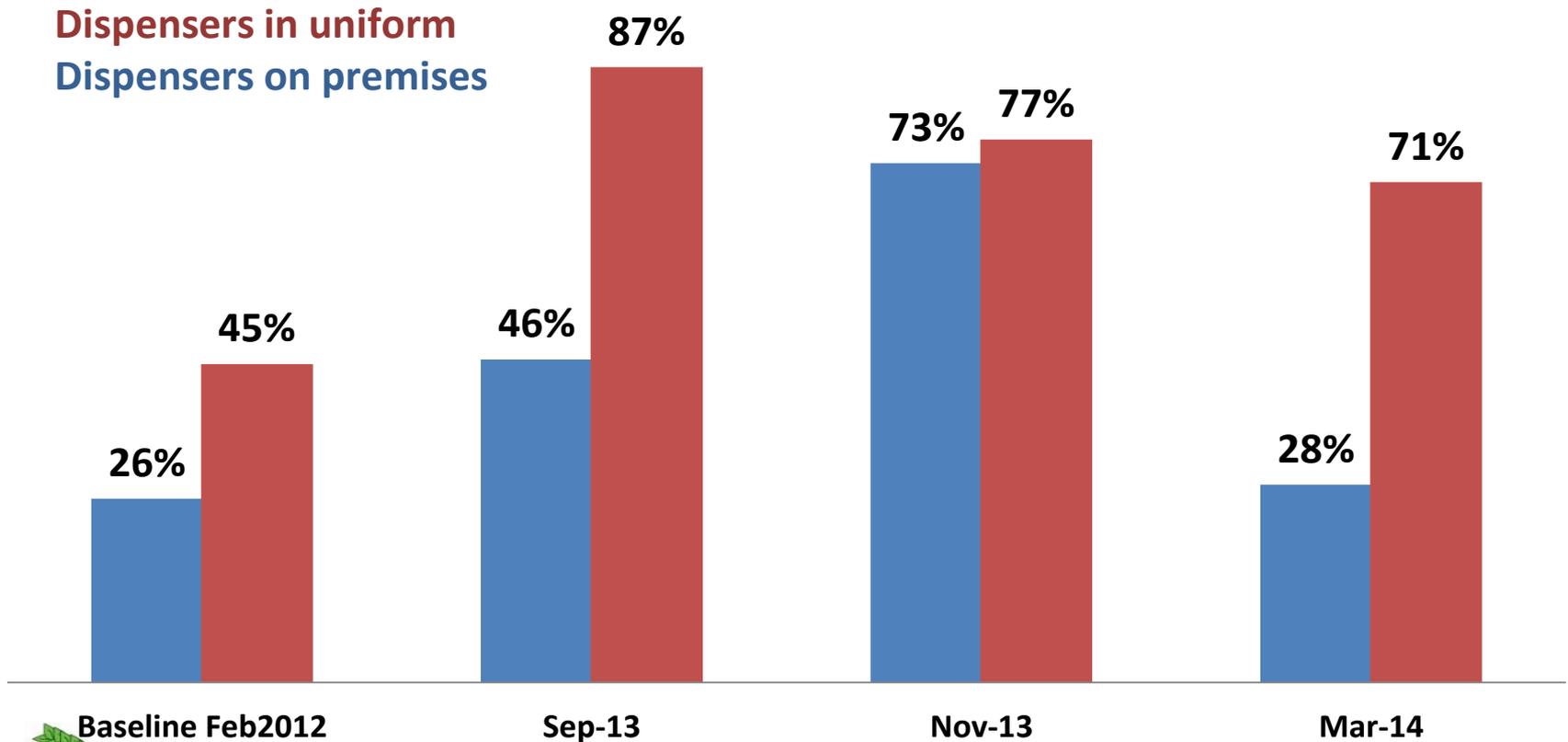
Results-Record Keeping

Purchase receipts / invoices verified for products in stock



Results-Quality of Services

Quality of services and compliance with regulation requirements



Lessons learned and Challenges(1)

- Owners' investment to premises to meet standards have increased
- Joint inspection and monitoring by LMHRA/PBL has worked well:
 - Use of standardized tools has improved objectivity and thoroughness of the inspection process
 - A few medicines stores continue to avoid regulatory enforcement by closing during inspector visits
- Sensitization of consumers through radios press releases, and road shows has created awareness of AMS in the communities; however, full impact can only come from a sustained campaign



Lessons Learned and Challenges(2)

- Sub-standard quality products sold at the AMS level has decreased
- However, product quality is a problem of upstream supply chain
- Critical importance of LMHRA's continued efforts to strengthen product registration and inspection of wholesalers/importers
- Clear regulatory action where violations are observed during inspection is needed
- There have to be consequences for violation



Next Steps for AMS Program (1)

- **Sustained regular inspections by LPB/LMRA**
 - Robust and clear regulatory action
 - Use of inspection registers for transparency and objectivity
- **Public education campaigns by both LMHRA and PBL**
 - Promote AMS brand
 - Product quality issues
- **Institutionalization of dispensers' training**
 - Work with Pharmaceutical Association of Liberia (PAL) and University of Liberia School of Pharmacy to enhance the curriculum for dispensers
- **AMS enhancements and linkages with public health programs**
 - ACT and RDT delivery for malaria case management in private sector
 - Improve supervision, monitoring, and information management



Next Steps for AMS Program (2)

- Mobilize resources for national scale up
 - Nationwide sensitization of county health teams and medicine stores proprietors plus GIS mapping and preliminary inspection
 - Prioritize rollout in counties with large number of medicine stores
 - Contribution of owners and dispensers to training costs in addition to premises upgrade investment
 - Coordinate and tap into opportunities to link AMS with other public health programs such as NMCP to support specific rollout activities related to their respective goals



Thank You!

